



REMARKS:

A & C. with Fel. Aslt. and 1897 Pl. to wt: at time and place of occur. he did possess a gun (not rec'd) and fired approx 3 shots at one Thomas Hagan, causing said Hagan's confinement to Bellevue Hosp. w th gunshot of Leg. left thigh.

NARCOTIC/DRUG INFORMATION (to be obtained by interrogating prisoner, not through department records).

Type of Narcotic/Drug Used	How Long Used	Amount Used Daily	Daily Cost	Cause of Addiction
NO DRUGS				<input type="checkbox"/> Medical <input type="checkbox"/> Other (specify)
Previously arrested for narcotics violation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	How Many Times?	Date(s)	Disposition(s)

ADDRESS(ES) AT TIME(S) OF PREVIOUS NARCOTICS ARREST(S)

Any Previous Treatment for Cure? If So, Where?	How Many Times?	Where Employed or School if Student

INFORMATION BELOW TO BE ENTERED ONLY IF PRISONER IS UNDER 21.

Res. Pct.	Youth Gang Involved in Arrest?	If Gang Member, Name of Gang	Mother's Maiden Name
	<input type="checkbox"/> Yes <input type="checkbox"/> No		

(Rank)

(Signature of Desk Officer)

(Pct.)

Prisoner's Surname **Francis** First Name and Initials **Reuben** Address (Number and Street—) **871 E. 179 St.** Apt. (No.) **20**

Pct. **34** Arrest Ser. No. **†** *Drug Code Occupation/School **salesman** City or Post Office **Bronx** State **N.Y.**

Sex **M** Color **N** Age **33** ** Date of Birth **3-2-31** Married Alien (City or Town) **NYC** Nativity (State or Country) Single Citizen

*Crime Code Time and Date of Arrest **11:30PM 2-21-65** Charge (Indicate grade of offense F.M.O.J.) **1st. Aslt.** Specific Offense (if drug involved, specify type) **1807 PL F Gun**

Pct. of Violation **34** and U.F. 61 No. *Officer Code Rank **Det.** Name of Arresting/Assigned Officer **Verd. Cavallaro** Shield No. **409** Command **343q.**

Time and Date of Violation **3:05PM 2-21-65** Place of Violation **654 W. 166th St.** Inside Type of Premises **hall.** Outside

Complainant's Name **People** Address **NY County**

Arrested by: Complainant Other (Identify Officer under "Remarks") Arrest Made: On Duty Off Duty Duplicate Report Forwarded to: (If none so indicate) Prisoner Fingerprinted? Yes No Addict? Yes No If Addict, Complete Back of Form

U.F. 4 forwarded to I.U. must be legible.
 *For use by Statistical and Records Bureau only.
 †Enter "F.O.A." or "S.W." if appropriate.
 **For use in special surveys only.

REMARKS:

A & C. with Fel. Aslt. & 1897 PL gun, to wit: at time and pl. of occur., he did possess a gun (not rec'd) and fired 3 shots at one ~~Thomas Hagan~~ TALMADGE HAYER causing said Hagan's confinement to Bellevue Hosp. wth gunshot wound of the left thigh.

NARCOTIC/DRUG INFORMATION (to be obtained by interrogating prisoner, not through department records).

Type of Narcotic/Drug Used NO DRUGS	How Long Used	Amount Used Daily	Daily Cost	Cause of Addiction <input type="checkbox"/> Medical <input type="checkbox"/> Other (specify)
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Previously arrested for narcotics violation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	How Many Times?	Date(s)	Disposition(s)
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ADDRESS(ES) AT TIME(S) OF PREVIOUS NARCOTICS ARREST(S)

Any Previous Treatment for Cure? If So, Where?	How Many Times?	Where Employed or School if Student
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INFORMATION BELOW TO BE ENTERED ONLY IF PRISONER IS UNDER 21.

Res. Pct.	Youth Gang Involved in Arrest? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Gang Member, Name of Gang	Mother's Maiden Name
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(Rank) (Signature of Desk Officer) (Pct.)

Prisoner's Surname

First Name and Initials

Address (Number and Street—

Apt. No.

Francis

Reuben

871 E. 179th St. 2C

Pct.	Arrest Ser. No.	*Dr. g Code	Occupation/School	City or Post Office	State
54			salesman	Bronx	NY
Sex	Color	Age	*Date of Birth	<input type="checkbox"/> Married <input type="checkbox"/> Alien (City or Town) <input type="checkbox"/> Single <input checked="" type="checkbox"/> Citizen	Naivty (State or Country)
M	N	33	5-4-31	NYC	NYC
*Crime Code	Time	and Date of Arrest	Charge (Indicate grade of offense F.M.O.J.) * Specific Offense (if drug involved, specify type)		
	11:30PM	2-21-65	1. Pol. ASlt. F Gun 2. 1897 PL		
Pct. of Violation	and U.F. 61 No.	*Officer Code	Rank	Name of Arresting/Assigned Officer	Shield No. Command
54			Det.	Ferd. Cavallaro	409 348q

Time	and Date of Violation	Place of Violation	<input checked="" type="checkbox"/> Inside <input type="checkbox"/> Outside	Type of Premises
3:05PM	2-21-65	654 W. 166th St.		dance hall

Complainant's Name	Address
Peoble	NY County

Arrested by:	Arrest Made:	Duplicate Report Forwarded to:	Prisoner Fingerprinted?	Addict?	If Addict, Complete Back of Form
<input type="checkbox"/> Complainant <input type="checkbox"/> Other (Identify)	On Duty <input checked="" type="checkbox"/> Off Duty <input type="checkbox"/>	(If none so indicate)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> Officer	under "Remarks")				

Disposition Code	Action of Court	Date	Judge	Court
*				

Original Charge Changed?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Final Charge (fill in after final disposition)	NOTE: U.F. 5 forwarded to I.U. must be the original copy. *Items marked with asterisk will be entered at S. & R. Bur. †Enter "F.O.A." "G.T.A." or "S.W." if appropriate.
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ARREST DISPOSITION REPORT

(OVER)

U.F. 5 (Rev. 11-61)

REMARKS:

A & C. with Fel. Aslt. and 1897 PL. to wt: at time and place of occurr. he did possess a gun (not rec'd) and fired approx 3 shots at one Thomas Hagan, causing said Hagan's confinement to Bellevue Hosp. w th gunshot of ~~leg~~ left thigh.

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NO DRUGS				<input type="checkbox"/> Medical <input type="checkbox"/> Other (specify)
Previously arrested for narcotics violation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	How Many Times?	Date(s)	Disposition(s)

ADDRESS(ES) AT TIME(S) OF PREVIOUS NARCOTICS ARREST(S)

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Res. Pct.	Youth Gang Involved in Arrest?	If Gang Member, Name of Gang	Mother's Maiden Name
	<input type="checkbox"/> Yes <input type="checkbox"/> No		

(Rank)

(Signature of Desk Officer)

(Pct.)

Prisoner's Surname

First Name and Initials

Address (Number and Street—

Apt. No.

Francis Reuben

871 E. 179 St.

2C

Pct. Arrest Ser. No. † *Dr. g Code Occupation/School City or Post Office State

34

salesman

Bronx

N.Y.

Sex Color Age * Date of Birth Married Alien (City or Town) Nativity (State or Country)

M N 53

Date of Birth

3-2-31

 Married Alien (City or Town) Nativity (State or Country)

NYC

 Single Citizen

*Crime Code Time and Date of Arrest Charge (Indicate grade of offense F.M.O.J.) † Specific Offense (if drug involved, specify type)

*Crime Code Time and Date of Arrest

11:30PM 2-21-65

Charge (Indicate grade of offense F.M.O.J.) † Specific Offense (if drug involved, specify type)

Fel Aslt.

1897 PL

F Gun

Pct. of Violation and U.F. 61 No. *Officer Code Rank Name of Arresting/Assigned Officer Shield No. Command

34

Rank Name of Arresting/Assigned Officer

Det. Ferd. Cavallaro

Shield No.

409

Command

34Sq.

Time and Date of Violation Place of Violation Inside Type of Premises

3:05PM 2-21-65

Place of Violation

654 W. 166th St.

 Inside Type of Premises

hall,

 Outside

Complainant's Name Address

People

NY County

Arrested by: Arrest Made: Duplicate Report Forwarded to: Prisoner Fingerprinted? Addict? If Addict, Complete Back of Form

 Complainant Other (Identify Officer under "Remarks")

Arrest Made: On Duty Off Duty

 On Duty Off Duty

Duplicate Report Forwarded to: (If none so indicate)

Prisoner Fingerprinted?

Yes No

 Yes No

Addict?

Yes No

 Yes No

If Addict, Complete Back of Form

Disposition Code * Action of Court Date Judge Court

Disposition Code *

Action of Court

Date

Judge

Court

Original Charge Changed? Yes No Final Charge (fill in after final disposition) NOTE:

Original Charge Changed? Yes No

 Yes No

Final Charge (fill in after final disposition)

NOTE:

U.F. 5 forwarded to I.U. must be the original copy.

*Items marked with asterisk will be entered at S. & R. Bur.

†Enter "F.O.A.," "G.T.A." or "S.W.," if appropriate.

ARREST DISPOSITION REPORT

(OVER)

U.F. 5 (Rev. 11-61)

Gallery No. _____

Where born New York City N.Y.
(COUNTRY, STATE OR CITY)

Sex Male Age 33 Color Neg.

Eyes Br. Hair Bl. Height 5'8" Weight 160

Occupation Salesman

Right or Left-Handed Right

Distinctive Marks and Scars None

Operator or Chauffeur License _____

Auto License No. _____ Model _____

Make _____ Color _____

Arrest No. _____ 34 Pct. _____

Date of Arrest 2/21/65

Crime Fel. Ass. & 1897 PL _____

Officer Det. Cavallaro 34th

Social Security No. _____

REMARKS

RESIDENT KNOWN CRIMINAL

D. D. 52a

Name Reuben Francis
(SURNAME) (FIRST) (MIDDLE)Alias Reuben XAddress 871 E. 179th St 2C Apt. No. 2C Floor 2Borough Bronx N.Y. 34 PrecinctAddress verified by Det. Cavallaro 34 Squad Date 2/21/65

Prison (In or Out) _____

Criminal Specialty Fel. Assault & 1897 PLName of Associates None

B No. or E No. of Associates _____

CHANGE OF ADDRESS

IMPORTANT—Residence of Prisoner will be verified quarterly. Name of Detective and date verified will be inserted under Remarks. If criminal moves, forward Card to Resident Precinct and notify B. C. I.

Gallery No. _____

Where born New York City N.Y.
(COUNTRY, STATE OR CITY)

Sex Male Age 33 Color Neg.

Eyes Br. Hair Bl. Height 5'8" Weight 160

Occupation Salesman

Right or Left-Handed Right

Distinctive Marks and Scars None

Operator or Chauffeur License _____

Auto License No. _____ Model _____

Make _____ Color _____

Arrest No. 34 Pct.

Date of Arrest 2/21/65

Crime Fel. Ass. & 1897 PL

Officer Det. Cavallaro 34th

Social Security No. _____

REMARKS

(PHOTOGRAPH)

RESIDENT KNOWN CRIMINAL

D. D. 52a

Name Reuben Francis
(SURNAME) (FIRST) (MIDDLE)Alias Reuben XAddress 871 E. 179th St 2C Apt. No. 2C Floor 2Borough Bronx N.Y. 34 PrecinctAddress verified by Det. Cavallaro 34 Squad Date 2/21/65

Prison (In or Out) _____

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CHANGE OF ADDRESS

IMPORTANT—Residence of Prisoner will be verified quarterly. Name of Detective and date verified will be inserted under Remarks. If criminal moves, forward Card to Resident Precinct and notify B. C. I.

Cross out previous designation. - Re-address in next space.

1 2-21-65 3:05 PM
654 W. 166th St.
Fel. Asst. & 1897 PL gun
not recover'd

2 Shot- Thomas Hagan m/n/22

USE ALL SPACES

3 2-22-65 Pt. 1A
Judge Gladwyn
bail 10,000. adj. 2-24

4 **MICHAEL J. SHERWIN**
Bail cont'd - adj-3-3-
3-3 Adj to - 2-12-65 Judge Lerq.

5 Perp. Reuben Francis
871 E. 179 St. Bx. NY
B# 570-986

MYN31 5'8, 160, Mkhair for legs

6 wearing for ~~trousers~~ trousers
suit with neat tuxed brown coat
Hank other mustache + glasses
ATTY - Mitchell - 225 Broadway

BEFORE DISCARDING

7 ~~3-4-65 Supreme Ct
Judge Carter -
Whit of Holes. Longue dismissed~~

8 3-10-65 GR. Jury indictment
873-65

3-12-65 def'd failed to
appear.

9 Arr. 254 54Pet
ADA Stern
ARR Mes. *Luoff*

10 Sgt ARonoff - SE 3 6983

THIS ENVELOPE

11 2/2/66 arrested Bench Warrant
brought to Pt 30 - to Dept Con
arrang. Pt 30
2/8/66 25000 bail (not guilty plea)

12 Call Herb Stiles
1st - Thea. 2-23-65